

Application for Corporate Manager***Must Be A Nebraska Resident*****Please submit in Triplicate****RECEIVED**

DEC 06 2002

NEBRASKA LIQUOR
CONTROL COMMISSIONReturn to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Double Eagle Beverage, LLC *

Class & License number

Class W *

Trade Name of Licensed Premise

Double Eagle Beverage, LLC *

Street Address of Licensed Premise

5840 North 70th Street *

City

Lincoln *

County

Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO: _____

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Gillick, Anthony G. *

Sex *

F

M

C

E

Social Security Number

Date of Birth

* *

Place of Birth

St. Louis, Missouri *

Home Street Address

8235 Karl Ridge Road, Apt. 513 *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68506 *

Home Telephone Number

847/774-5821 *

Business Telephone Number

402/467-3573 *

Drivers License Number

* *

State

NE *

Are You Married? * Yes ☒ No ☐ If Yes, You must complete the following:**SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)**

Full Name (Last, First, Middle, Maiden)

Social Security Number

<http://www.ims.state.ne.us/LCCtemp/35-4013.html>

12/4/2002

Drivers License Number 1	State IL	Date of Birth 1
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Place of Birth

Oklahoma City, Oklahoma

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No
☐ ☒

* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No
☒ ☐

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No
☐ ☒

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

Yes No
☒ ☐

* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No
☒ ☐

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLETE

Year
From To

Applicant: City & State

Lincoln, Nebraska	10/02	12/02	
Spouse: City & State			
Arlington Heights, Illinois	1/89	12/02	

Year	
From	To
Applicant: City & State	
Arlington Heights, Illinois	1/89 10/02
Spouse: City & State	
Arlington Heights, Illinois	1/89 12/02

Year	
From	To
Applicant: City & State	
Albany, Georgia	4/82 12/88
Spouse: City & State	
Albany, Georgia	4/82 12/88

Year	
From	To
Applicant: City & State	
St. Louis, Missouri	1/79 4/82
Spouse: City & State	
St. Louis, Missouri	1/79 4/82

EMPLOYERS - LIST LAST TWO EMPLOYERS		
Name of Employer	Year	
	From	To
Quality Beers Ltd.	1/89	12/02
Name of Supervisor	Telephone Number	
Owner	847/647-7772	

Name of Employer	Year	
	From	To
Albany Beverage Co.	4/82	12/88
Name of Supervisor	Telephone Number	
Mark Pirrung	404/699-6700	

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE		
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STATE OF Nebraska
) SS
 COUNTY OF Douglas

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

RECEIVE

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NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATIONNEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

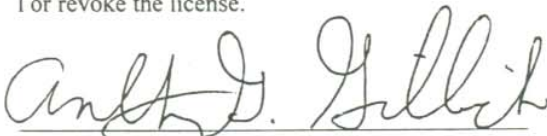

Signature of Spouse - Lydia Gillick

SUBSCRIBED in my presence and sworn to before me this 25TH day of ^{NOVEMBER}~~December~~, A.D., 2002.




Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.


Signature of Licensee/Applicant

DOUBLE EAGLE BEVERAGE, LLC

ANTHONY G. GILICK

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 25TH day of ^{NOVEMBER}~~December~~, A.D., 2002.




Signature of Notary Public

FORM 35-4178
REV 2/01

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Anthony J. Galligan
Signature of Applicant

x *Lynnea Dilleck*
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 5th
day of December, 2002

Subscribed in my presence and sworn to before me this 10th
day of DECEMBER

Mary R. Galligan
Notary Signature & Seal

Lina Soto
Notary Signature & Seal



FORM 35-4013
REV. 2/01